

DELINEATION OF PRIVILEGES - DIETETICS For use of this form, see AR 40-68; the proponent agency is OTSG					1. MEDICAL TREATMENT FACILITY							
2. NAME			3. RANK		4. DUTY SSI							
5. Under-Graduate	a. DEGREE		b. INSTITUTION			c. DATE						
6. Graduate												
7. REGISTRATION NO.					8. MEMBER ADA							
9. POST-GRADUATE SPECIALTY TRAINING					10. PRIVILEGING PERIOD							
					a. FROM		b. TO					
					11. REMARKS							
Category I - Routine nutritional assessments and nutritional care procedures expected of registered hospital dietitians. Category II - Special Privileges: Require additional skill level demonstrated through additional training and practical expertise (<i>see item 9 above</i>).				APPLICANT'S REQUEST		SUPERVISORS'S RECOMMENDATION			CREDENTIAL COMMITTEE'S RECOMMENDATION			
				FULL PRIV.	COND. PRIV.	FULL PRIV.	TEMP. PRIV.	COND. PRIV.	FULL PRIV.	TEMP. PRIV.	COND. PRIV.	NOT APPD.
12. Prescribing vitamins.												
13. Prescribing therapeutic nutritional supplements.												
14. Ordering laboratory tests.												
15. Percent body fat testing.												
16. Prescribing diets other than weight control.												
a. SIGNATURE										b. DATE		
17. APPLICANT												
18. IMMEDIATE SUPERVISOR												
19. CREDENTIALS COMMITTEE REPRESENTATIVE												